State of Hawaii Department of Health Clean Water Branch	**Do NOT submit this document.**
Guidelines for CWB NOI Form H (CWBNOI_H.doc)	
Guidelines for Notice of Intent for Hawaii Administrative Rules, Chapter 11-55, Appendix H, National Pollutant Discharge Elimination System (NPDES) Notice of General Permit Coverage (NGPC)	

For coverage under a specific NPDES General Permit, the following items are required to be submitted to the Clean Water Branch (CWB):

A. **CWB NOI General Form** (CWBNOI_General.pdf) with Certifying Person's original signature [via "Submit via Email" button and hard copy]
B. **General Permit Specific CWB NOI Form H** (CWBNOI_H.doc) [via hard copy]
C. **All applicable attachments** [via hard copy]
D. **$500 Filing Fee** [Check made payable to "State of Hawaii"]
E. **Additional copies as required for Islands other than Oahu** [see Notes V.D. and V.E. of the General Guidelines]

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General Instructions - This is an MSWord form. Please:

1. Insert the required information - The NGPC Renewal Information is required for an Existing Facility with an NGPC. If this is for an Existing Facility without an NGPC or a New Facility, skip this item.
2. Save

3. Print
4. Submit with the CWB NOI General Form, attachments, and $500 Filing Fee. Please see Note V - Inquiries and Submittals and Note VI - Filing Fee of the General Guidelines for more submittal information.

1. Petroleum Product Bulk Terminal Effluent Discharge Information

   a. Operations Contributing to the Discharge

      List all of the operations contributing to the discharge and the average flow of treated process wastewater effluent contributed by each operation. Indicate the worst-case scenario for the contaminated storm water runoff quantity.

   b. Rates of Treated Process Wastewater Effluent Discharge from Discharge Point(s)

      Indicate the discharge point and its average, maximum, and total daily flow rates of the treated process wastewater effluent discharge.

   c. Treatment of Discharge

      Indicate the treatment to be received by the treated process wastewater effluent which is based on the quantity and rate of discharge from the facility.

   d. Frequency of Discharge

      Indicate how often the discharge into receiving State waters will occur, as applicable.

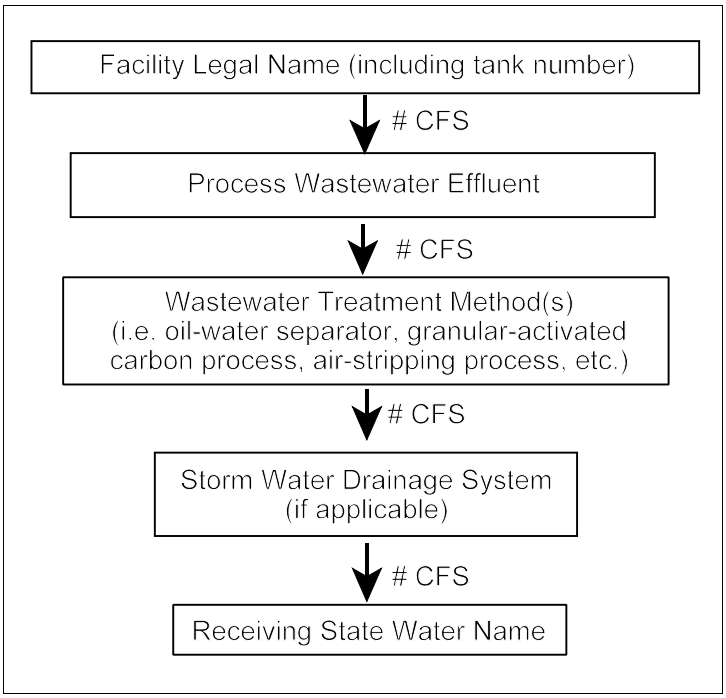
2. Location Map

   a. Provide a location map on 8-1/2 by 11 inches sized paper showing the island on which the facility is located and the approximate location of the facility.

   b. Provide a topographic map on 8-1/2 by 11 inches sized paper or folded to 8-1/2 by 11 inches showing at least one mile beyond the facility's property boundaries and the receiving State water(s). The map should also include the discharge point(s) where the treated process wastewater effluent and/or contaminated storm water exits the facility and discharges to the receiving State water(s) and, if applicable, the locations where the treated process wastewater effluent and/or contaminated storm water enters into a storm drainage system/structure.

   c. If there is more than one (1) discharge point into a drainage structure and/or State receiving water, provide identification numbers and coordinates for each discharge point.

3. Flow Chart



An example of a line drawing indicating how the treated process wastewater effluent flows through the facility and the approximate amount of flow is shown. Indicate any treatment system(s) or erosion control(s) used. The quantity of discharge contributed by each source (i.e., tank water draw or contaminated storm water) may be estimated if no data is available.

4. Existing or Pending Permits, Licenses, or Approvals

   a. Indicate any additional NPDES Permit number and/or NGPC File number which is associated with this facility.

   b. Provide any Department of the Army (DA) file number associated with the facility.

   c. Provide the Section 401 Water Quality Certification (WQC) file number associated with the DA Permit.

   d. Provide the RCRA Permit number for any hazardous wastes stored or used at the facility.

   e. For SARA Facilities, indicate the chemicals and their quantities on site.

   f. Others (i.e., Underground Injection Control file number).

5. North American Industrial Classification System (NAICS) United States Structure Codes

   See Note 1 of the General Guidelines.

6. Business Activity

   Provide a brief description of the nature of business conducted at the facility (i.e., diesel wholesaler, petroleum products retailer, etc.)

7. Laboratory or Consulting Firm(s) Information

   Provide the requested information for the laboratory or consulting firm that performed the analyses required in Sections 16 and 17.

8. Physical Effluent Quality

Place an "X" in either the "Believe Present" column or the "Believe Absent" column based on the test results or your best estimate. Provide an explanation for why each parameter is believed to be present in the discharge, as applicable.

9. Water Quality Parameters

a. All of the parameters must be tested and reported. Provide a copy of the laboratory data sheets with Quality Assurance/Quality Control and Chain of Custody documents, as applicable.

b. Test results shall be obtained from a representative sample. "Representative sample" as defined in HAR, Chapter 11-55, Appendix A, Section 14(a):

> "As used in this section, a representative sample means that the content of the sample shall:
>
> (1) Be identical to the content of the substance sampled at the time of the sampling;
>
> (2) Accurately represent the monitored item (for example, sampling to monitor final effluent quality shall accurately represent that quality, even though the sampling is done upstream of the discharge point); and
>
> (3) Accurately represent the monitored item for the monitored time period (for example, sampling to represent monthly average effluent flows shall be taken at times and on days that cover significant variations). Representative sampling may include weekends and storm events and may mean taking more samples than the minimum number specified elsewhere in the applicable general permit.
>
> The burden of proving that sampling or monitoring is representative is on the permittee."

c. One test result may be reported for Salinity, Chloride, or Conductivity.

d. The test results shall be reported to the nearest decimal place or whole number as shown in the parentheses following each parameter. For example, "Temperature (0.1 °C)" - Temperature shall be reported to the nearest tenth of a centigrade and "Ammonia Nitrogen (1 µg/l)" - Ammonia Nitrogen shall be reported to the nearest whole microgram per liter.

e. Indicate the test method used for the parameter. The test methods that may be used are promulgated in 40 CFR Part 136 and, when applicable, listed in the references of chemical methodology for seawater analyses (see HAR, Chapter 11-54, Section 10(b)). If a test method has not been promulgated for a particular parameter, you may apply for approval of an alternate test procedure by following 40 CFR Section 136.4.

f. The detection limit of the test methods used shall reflect the applicable numerical limitations as specified in HAR, Chapter 11-54 and shall be indicated.

i. The test method indicated shall have the detection limit below and closest to the numerical limit specified in HAR, Chapter 11-54. For situations where the numerical limitation is below the detection limit of the test methods, use the test method which has the detection limit closest to the numerical limitation.

ii. If the test result is not detectable, indicate that the test result is "N.D." or "not detected."

g. Provide the specific numeric criteria for the receiving water from the “geometric mean not to exceed the given value” column of the applicable table in HAR, Section 11-54-5.2(b)(1), (d)(1), or (d)(2) or Section 11-54-6(a)(3), (b)(3), or (c)(3). The analysis shall include an explanation and evaluation of the effluent quality data collected with respect to the applicable specific numeric criteria for the receiving water(s) specified under HAR, Chapter 11-54.

10. Toxic Parameters

a. Test and report on the parameters which are believed to be present in the effluent. For example, if a tank containing a petroleum product leaked, you should expect that petroleum product to be present in the process wastewater effluent. Provide a copy of the laboratory data sheets with Quality Assurance/Quality Control and Chain of Custody documents, as applicable.

b. The parameters are categorized into Metals, Organonitrogen Compounds, Pesticides, Phenols, Phthalates, Polynuclear Aromatic Hydrocarbons, Volatile Organics, and Others and are listed alphabetically. A Glossary of Chemicals is listed in Note 2 of the General Guidelines.

c. Fill in each space to indicate that each parameter has been considered. If a parameter does not apply to the activity, enter "N/A" for "not applicable" in the "Test Result" column to show that the parameter was considered.

d. The test results shall be reported in micrograms per liter.

e. Indicate the test method used for the parameter. The test methods that may be used are promulgated in 40 CFR Part 136 and, when applicable, listed in the references of chemical methodology for seawater analyses (see HAR, Chapter 11-54, Section 10(b)). If a test method has not been promulgated for a particular parameter, you may apply for approval of an alternate test procedure by following 40 CFR Section 136.4.

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ii. If the test result is not detectable, indicate that the test result is "N.D." or "not detected."

g. Provide the specific numeric criteria for the receiving water (freshwater or saltwater) from the “acute” or “chronic” column of the table in HAR, Section 11-54-4(b)(3). For intermittent discharges, provide the “acute” criteria and for continuous discharges, provide the “chronic” criteria.

11. Treatment System Operations Plan

This plan shall specify the treatment system to be used and a detailed description of the operation. It shall include a sampling plan and the schedule for the sampling and analysis of the effluent. The sampling plan shall include the following:

a. Sampling procedures;

b. Location of sampling;

c. Person responsible for sampling;

d. Flow estimation period;

e. Laboratory that will analyze samples;

f. Test methods and detection levels for each parameter;

g. Quality Assurance/Quality Control methods; and

h. Chain of custody of samples.

The treatment system operations plan shall be modified by the Permittee as required by the Director.

12. Additional Information

Any other site-specific information pertaining to the facility may also be provided in this section. Additional sheets may be attached with reference to this item.